

<p>14. STAGE OF PROCEEDING Check the box which corresponds to the stage of the proceeding during which the work claimed at Item 15 was performed even if the work is intended to be used in connection with a later stage of the proceeding. CHECK NO MORE THAN ONE BOX. Submit a separate voucher for each stage of the proceeding.</p>									
<u>CAPITAL PROSECUTION</u>			<u>HABEAS CORPUS</u>			<u>OTHER PROCEEDING</u>			
a. <input type="checkbox"/> Pre-Trial	e. <input type="checkbox"/> Appeal	g. <input type="checkbox"/> Habeas Petition	k. <input type="checkbox"/> Petition for the U.S. Supreme Court	l. <input type="checkbox"/> Stay of Execution	o. <input type="checkbox"/> Other (Specify)				
b. <input type="checkbox"/> Trial	f. <input type="checkbox"/> Petition for the U.S. Supreme Court	gg. <input type="checkbox"/> State Court Appearance	Writ of Certiorari	m. <input type="checkbox"/> Appeal of Denial of Stay					
c. <input type="checkbox"/> Sentencing	h. <input type="checkbox"/> Evidentiary Hearing	i. <input type="checkbox"/> Dispositive Motions		n. <input type="checkbox"/> Petition for Writ of Certiorari to the U.S. Supreme Court Regarding Denial of Stay	p. <input type="checkbox"/> Clemency				
d. <input type="checkbox"/> Other Post Trial	j. <input type="checkbox"/> Appeal								

15. CATEGORIES <i>(Attach itemization of services with dates)</i>	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH. ADJUSTED HOURS	MATH/TECH. ADJUSTED AMOUNT	ADDITIONAL REVIEW
a. In-Court Hearings (RATE PER HOUR = \$)		0.00		IN COURT TOTAL	IN COURT TOTAL
b. Interviews and Conferences with Client				Category a	Category a
c. Witness Interviews					
d. Consultation with Investigators & Experts					
e. Obtaining & Reviewing the Court Record				0.00	
f. Obtaining & Reviewing Documents and Evidence					
g. Consulting with Expert Counsel				OUT OF COURT TOTAL	OUT OF COURT TOTAL
h. Legal Research and Writing				Categories b-j	Categories b-j
i. Travel					
j. Other <i>(Specify on additional sheets)</i>				0.00	
TOTALS: Categories b thru j (RATE PER HOUR =)	0.00		0.00	0.00	

16. Travel Expenses (lodging, parking, meals, mileage, etc.)				
17. Other Expenses (other than expert, transcripts, etc.)				
GRAND TOTALS (CLAIMED AND ADJUSTED):	0.00		0.00	

18. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE	19. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION	20. CASE DISPOSITION
FROM: _____ TO: _____		

21. CLAIM STATUS	<input type="checkbox"/> Final Payment	<input type="checkbox"/> Interim Payment Number _____	<input type="checkbox"/> Supplemental Payment
Have you previously applied to the court for compensation and/or reimbursement for this case?		<input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, were you paid? <input type="checkbox"/> YES <input type="checkbox"/> NO
Other than from the Court, have you, or to your knowledge has anyone else, received payment (<i>compensation or anything of value</i>) from any other source in connection with this representation? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give details on additional sheets.			
I swear or affirm the truth or correctness of the above statements.			
Signature of Attorney _____			Date _____

22. IN COURT COMP.		23. OUT OF COURT COMP.	24. TRAVEL EXPENSES	25. OTHER EXPENSES	26. TOTAL AMT. APPROVED \$0.00
27. SIGNATURE OF THE PRESIDING JUDGE				DATE	27a. JUDGE CODE

Reset